#### COMMONWEALTH OF PENNSYLVANA

CAMPAIGN FINANCE STATEMENT

Thed 4/18/15 12

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred *each* did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION		PLEASE AND THE REAL PROPERTY.	han dinimates an angula manana man Kastanian Malinda sa mas	- Children and the control of the co
NUMBER	N/A	REPORT FILED ON BEHALF OF	CANDIDATE >	COMMITTEE 2 LOBBYIST 1
NAME OF FILING COMMITTEE CA				
STREET ADDRESS		e erkezett erkennologische Artistische von eine konsterne (er zu de destablisse erket til senne en eine er ein	OF AND SHALL THE PROPERTY AND SHALL ARE SHALL	·····································
2006	STeuben) Road			
СПУ		STATE	ZiP (	in the state of th
REMOIN 6		P4		19602
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION
8TH TUESDAY	MAYOR OF REMDING		DEMO	65 19 QD
PRE-PRIMARY		getinteren in de state de la company de s General de la company de la com	***************************************	FOR OFFICE USE CHLY
2ND FRIDAY 2. PRE-PRIMARY	DATES OF REPORTING PERIOD 05 05 15 TO	06 08 15		ner timen nemer vene und museum interes venet eile in den er gestelle eile gestelle die de de de de de de de d
30 DAY			1	
POST-PRIMARY X	CASH BALANCE AT END			
6TH TUESDAY 4. PRE-ELECTION	OF REPORTING PERIOD:  TOTAL AMOUNT OF FILER'S	<u>\$</u> D	h. Ah Ah Ah an Tao amang pi hid	
2ND FRIDAY PRE-ELECTION	OUTSTANDING DEBTS OR LIABILIT AT THE END OF REPORTING PERIO		SE SHAPPY COLLEGE AVAILABLE FOR	
30 day Post-election	AMENDMENT YES REPORT?	NO	ne year on the second s	
ANNUAL REPORT	TERMINATION YES	NO	TO GOLD THE STATE OF THE STATE	
t statement is tiled o	n behalf of a Political Committee or C n behalf of a <u>Candidate</u> , the Candidat n behalf of a <u>Contributing Lobbyist</u> , tl	e must sian here.		surer must sign here.
Particularly formation of the second	THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR L	· · · · · · · · · · · · · · · · · · ·		derenning general for the first feature of the second state of the
EXCEED TWO HUNDRED AN	D FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO	THE BEST OF MY KNOWLED	JE AND BELIEF, TRUI	EL CORRECT AND COMPLETE.
SWORN TO AND SUB	SCRIBED BEFORE ME THIS			
DAY C	,	SIGNATI	JRE OF PERSON St	JBMITTING REPORT
and an experimental section of the s	SIGNATURE	Hodorous minimum manamalanda in del conserva	PRINTED N/	ME
MY COMMISSION EX	KPIRES, DAY YR.	AREA CODE	DAYTIME	TELEPHONE NUMBER
ART 11-	hahak at a Canadidatal and			
statement is med or	n behalf of a <u>Candidate's Authorized</u>	<u>Committee,</u> Candida	ite must sign l	nere.
iswear (or affirm) June 3, 1937 (P.L.	THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF T 1333, No. 320} AS AMENDED. COMMONWEALTH OF P	HIS POLITICAL COMMITTEE HA	IS NOT VIOLATED AN	Y PROVISIONS OF THE ACT OF
SWORN TO AND SUB	SCRIBED BEFORE ME THIS NOTARIAL(S	ENNSYEVANIA	4 7.	In Ou
15	July British B	VYE -	SIGNATURE OF CA	ANDIDATE
3	PEADING CITY BERN	S COUNTY //M//	13/1/	Jaley -
( All	My Commission Expires	Jul 23, 2015	PRINTED NA	05N0
MY COMMISSION EXP	IRE 01 23 2015	AREA CODE	DAYTIME	TELEPHONE NUMBER

The accompanying Commonwealth of Pennsylvania Campaign Finance Report (DSEB - 502) has been prepared by George Tomasi, CPA. I have prepared the report in its prescribed form in my capacity as campaign treasurer for Friends of Tim Daley. The report covers the period from the date of inception May 5, 2015 to June 8, 2015. The prescribed form is in accordance with the requirements of the Department of State, Commonwealth of Pennsylvania.

George Tomasi, CPA

George Lumosi CPA

June 11, 2015



## Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Friends of Tim Number Daley	Report Filed I ( Mark X)	3y Candida	te	Committee	X	Lobbyist
Name of Filing Committee, Candidate or Lobbyist	Friends of	Tim Daley		A CONTRACTOR OF THE PARTY OF TH		
Street Address	2006 Steul	oen Road				
City Reading		State	PA	Zip Code	19602	
Type of Report (Place x under report type)		de mariamento en la companione de la compa				
1-6 <sup>th</sup> Tuesday 2- 2 <sup>nd</sup> Friday 3-30 Day Post Pre-Primary Pre-Primary Primary	4- 6 <sup>th</sup> Tuesday Pre- Election	5- 2 <sup>nd</sup> Friday Pre- Election	6-30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
			X			
Date Of Election 05/19/2015 (MM/DD/YYYY)	Year	2015	Amendment Report		Termination Report	X
Summary of Receipts and From Date Expenditures 05/05/2015	To Date 06/08/			For	Office Use Only	
A. Amount Brought Forward From Last Report	\$ 7681	.05	<u> Karturia (K. et Istoria), N., Mer</u>	2.18.12.22.22.22.22.22.22.22.22.22.22.22.22.		
B. Total Mönetary Contributions and Receipts (From Schedule I)	\$ 1295	.00				
C. Total Funds Available [Sum of Lines A and B]	\$ 8976	.05				
D. Total Expenditures (From Schedule III) E. Ending Cash Balance	\$ 8976					
(Subtract Line D from Line C)	0   1	.00				
F. Value of In-Kind Contributions Received (From Schedule II)		0.00			•	
G. Unpaid Debts and Obligations (From Schedule IV)	\$ (	0.00				
Part 1- If this is a Committee report, treasurer sign he	re. If this is a Can	Affidavit Sec				
I swear (or affirm) that this report, including the attac	hed schedules on	paper, is to the b	est of my knowled	ge and belief tr	ue, correct and complet	e.
Sworn to and subscribed before me this	OMMONWEALTH	OF PENNSYLVANIA	#	D	•	
13 day of 3 44 20 13	NOTARIA	I CEAL		Jones		<del></del>
Buschle	BRITITAN' No ary		GEO 26e			
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	READING CITY, B Commission Ex	IERKS COUNTY pires Jul 23, 200		Printed Name		
My Commission expires 07 MO. DAY YR.	And the second second		ea Code		8-7900	
	······································			Dayı	ime Telephone Numbe	
Part II- If this is a report of a Candidate's Authorized C I swear (or affirm) that to the best of my knowledge a amended.	committee, candi nd belief this poli	date shall sign he tical committee h	re. as not violated any	provisions of th	ne Act of June 3, 1937 (F	<sup>2</sup> .L. 1333, NO.320) as
Sworn to and subscribed before me this	(CORREGEO ACTION AND ALL	Prid Ser manual	,		) ,	
5 day of Twy 20 15		TH OF PENNSYLVA	INIA	Jele 1	Wes	
7201 M.o.	#RIT1	TANY L NYE Bry Public	Sigha	ture of Candid	the idi	_
Signaphine	READING CIT My Commission	Y. BERKS COUNT	2015/)	rinted Name	7-9000	
My Commission expires 17 23 2015 MO. DAY YR.	-	Ar	ea Code	Daytin	ne Telephone Number	_

### PART B

### **All Other Contributions**

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Probability of the Control of the Co	
	Friends of Tim Daley

Full Name of Contributor	Date (MM/DD/YYY) \$
Richard Ehst	06/03/2015 250.00
House # Street Address 1309 East Wyomissing Blvd.	Date [MM/DD/YYYY] \$
Chy Reading State PA Zip Code 19611	Date [MM/DD/YYYY] 8
Pull Name of Contributor Dominic A. Gallo	06/03/2015 \$ 250.00
House # Street Address 700 Mercer St.	Date [MM/DD/YYYY] 5
City Reading State PA 21p Code 19601-1340	-Date [MM/DD/YYYY] 5
######################################	開設 Date (MM/DD/YYYY) 高名を
William G. Koch	06/03/2015 \$ 100.00
House # Street Address 205 Gaul Rd.	Date [MM/DD/YYYY] 3
Sinking Spring PA 2/p Code 19608-9719	Date [MM/DD/YYYY] \$
And the state of t	Principles of the control of the con
Full Name of Contributor Robert M. Keegan	Date (MM/DD/YYYY) \$. 05/15/2015 250.00
House # Street Address 65 Campbell Dr.	Date [MM/DD/YYYY] \$.
City Doylestown State PA Zip Code 18901	Date [MM/DD/YYYY] \$
E EUI Name of Contributor	Date (MM/DD/Y446/最高)
William C. Long	05/15/2015
House # Street Address 8 Pine Woods Ct.	Date [MM/DD/YYYY] \$
City Reading State PA Zip Code 19607-3360	Date [MIM/DD/YYYY] \$
Full Name of Contributor	Date IMM/DD/YYYY/E 32
House # Street Address	Date [MM/DD/YYYY] \$
City State Zip Code	- Assistant de Jongs
Zip Core : A	Date [MM/DD/YYY] \$

#### SCHEDULE II

### IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Filer Identification Number: Friends of Tim Daley		
1. Unitemized in Kind Contributions received value of	SEGRIOVA	R 1888 PRE CONTRIBUTION
TOTAL for the reporting period (1)	\$	50.00
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$2	SO;00 (FF	OM PART.F)
TOTAL for the reporting period (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECEIVED VALUE OVER \$250.00 [FR	OM PAR	
TOTAL for the reporting period (3)	\$	
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F)	\$ er	50.00

### SCHEDULE I

## **Contributions and Receipts**

**Detailed Summary Page** 

A STATE OF THE PERSONNELS AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE P	
Filer Identification Number	
B LIEL INCHINICATION MAILINGS B	
	Friends of Tim Dalev
	Hitende of Jim Dalen
N. C	
	/
The state of the s	
the Total Control of the Control of	

1.Unitemized Contributions and Receipts-\$50.00 or Less per Con	Ne butos	Fogesa	G-1951	
The second of th	icribator			
Total for the re	porting period	(1)	\$	250.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)				
Contributions Received from Political Committees (Part A)			\$	
All Other Contributions (Part B)			\$	1,045.00
Total for the rep	orting period	(2)	\$	1,045.00
3. Contributions Over \$250,00 (From Part C and Part D)		ni ce		
Contributions Received from Political Committees (Part C)			\$	
All Other Contributions (Part D)			\$	
Total for the rep	orting period	(3)	\$	
4. Other Receipts-Refunds, Interest Earned, Returned Checks, F	(C. (From Partit)			
Total for the repo	orting period	(4)	\$	0.00
Total Monetary Contributions and Receipts during this reporting penter amount totals from Boxes 1, 2, 3 and 4; also enter this amou Cover Page, Item B)	period (Add and unt on Page 1, Re	port	\$	1,295.00

# SCHEDULE III Statement of Expenditures

President and Southern College Control of the Contr	
Filer Identification Numbers	Friends of Tim Daley
Color back and a second comment	Friends of Tim Daley
	Thends of this Datey

Margaret A. Lawlor   Date [MM/DD/YYYY]   \$ 9.80		Managarat A							printing to the party
City   Reading   State   PA   Zip   19604   Stamps for campaign mailing		Margaret A.	Lawlor					9.80	
City   Reading   State   PA   Code   19604   Stamps for campaign mailing	House#	Street Address	219-B North	1.4th St	reet		Description of Expend	iture	
To Whom Paid Margaret A. Lawlor Description of Expenditure  City Reading State PA Zip Code 19604 Stamps for absentee ballot mailing Date [MM/DD/YYY] \$ 49.00  House # Street Address 219-B North 14th Street Description of Expenditure  City Reading State PA Zip Code 19604 Stamps for absentee ballot mailing Date [MM/DD/YYY] \$ 49.00  City Reading State PA Zip Code 19604 Stamps for absentee ballot mailing Description of Expenditure  City Reading State PA Zip Code 19604 Stamps for absentee ballot mailing Date [MM/DD/YYY] \$ 24.99  House # Street Address 219-B North 14th Street Description of Expenditure  City Reading State PA Zip Date [MM/DD/YYY] \$ 24.99  Doscription of Expenditure  City Scranton State PA Zip Date [MM/DD/YYY] \$ 281.18  Date [MM/DD/YYYY] \$ 281.18  Date [MM/DD/YYYY] \$ 281.18  Date [MM/DD/YYYY] \$ 2600.00			P-1/1/2/2000	1 1411 51	The second secon	1		Party Commencer	
Margaret A. Lawlor	Reading	5	PA	7		19604	Stamps for camp	aign mailing	
House # Street Address 219-B North 14th Street  City Reading State PA Zip Code 19604 Stamps for absentee ballot mailing  To Whom Paid Margaret A. Lawlor Description of Expenditure  Gity Reading State PA Zip O5/13/2015 49.00  House # Street Address 219-B North 14th Street  City Reading State PA Zip O5/13/2015 505/13/2	To Whom Paid	Margaret A. I	awlor			Control of the Contro			
City   Reading   State   PA   Zip   19604   Stamps for absentee ballot mailing	or topping the state	<u> </u>							
Reading	House #	Street Address	219-B North	h 14th S	treet		Description of Expendi	tore	
Margaret A. Lawlor	City Reading	5	State P.	A	The same of the sa	19604	Stamps for absent	ee ballot mailii	ng
Street Address   Street Address   219-B North 14th Street   Description of Expenditure	To Whom Paid	Margaret A. L	awlor					49.00	
Reading   PA   Zip   19604   Stamps for absentee ballot mailing   Date [MM/DD/YYYY]   \$ 24.99	*1425725 #F	ū						<b>18-180</b>	
Reading	invine ii	Street Address 21	9-B North	14th Stre	eet		Description or Expendi	ture	
Margaret A. Lawlor    Description of Expenditure   Description of Expenditure	City Reading	Militario de la Companya de Co	State PA			19604	Stamps for absent	ee ballot mailin	ıg
House # Street Address 219-B North 14th Street  City Reading	To Whom Paid	N. 6					Epate (MIVI/DID/VY)V		tima di Santa di San
City   Reading   State   PA   Zip   19604   Cookie tray for Senior High Rise		Margaret A. L.	awior				A STATE OF THE PARTY OF THE PAR	24.99	
City Reading PA Zip 19604 Cookie tray for Senior High Rise  To Whom Paid Dan Simrell Advertising Date [MM/DD/YYYY] \$ 281.18  House # Street Address 630 Jefferson Avenue Description of Expenditure  City Scranton State PA Zip 18510 Palm cards for advertising  To Whom Paid Carelyn P. Hellenger 2600 00	House #	Street Address	19-B North	14th Str	·eet		Description of Expendi	ture	
Reading PA Code 19604 Cookie tray for Senior High Rise  To Whom Paid Dan Simrell Advertising Date [MM/pb/YYYY] \$ 281.18  House # Street Address 630 Jefferson Avenue Description of Expenditure  City Scranton Paid PA Zip Code 18510 Palm cards for advertising  To Whom Paid Covely P. Hellenge Date [MM/pb/YYYY] \$ 2600.00	City .		Etako			10.00			
Dan Simrell Advertising    Dan Simrell Advertising   Description of Expenditure	Reading		PA	1		19604	Cookie tray for Se	nior High Rise	
House # Street Address 630 Jefferson Avenue Description of Expenditure  Chy Scranton State PA Zip 18510 Palm cards for advertising  To Whom Paid Carely P. Holland 2600 00	To Whom Paid	Dan Simrell A	dvertising		A. T. S.			281.18	
Scranton Paid Corely P. Holland Paid Corely P. Holland Paid Corely P. Holland Paid Paid MM/0D/4747 3 2600 00	House #	Street Address 6	30 Jefferson	Avenue	<u> </u>		1.	ture .	ra di Libra
Corolar P. Hellers	City Scranton	Water State of the	State PA	S.		18510	Palm cards for ad	vertising	
	To Whom Paid	Carolyn R. He	olleran	ej, artiski sije ji, rekej rezi		an ing paggang di kacamatan di Kababatan di		2600.00	Marchine State Company of the
	House#								
1740 Van Reed Road  Description of Expenditure		1	740 Van Re	ed Road	<u>.</u>		vestription of expendi	The second second	
Sinking Spring PA Zip 19608 Returned contribution	Sinking	Spring	State PA	e e	A vision of many traders of control	19608	Returned contrib	ution	
To Whom Paid: Dan Simrell Advertising Date [MM/DD/YYYY] 2362.81	To Whom Paid	Dan Simrell .	Advertising	And Americal Plane, Son. place of Additional				2362.81	
House # Street Address 630 Jefferson Avenue 05/15/2015 2502.81  Description of Expenditure	House #	Street Address	530 Jefferson	ı Avenii					
Gity: State: Zin	Gity		State						
Scranton PA code 18510 Direct mail advertising	Scranton		PA		Code	18510			
Flo-Whom Paid East VIIV/Job/ANY/2 ESS	To Whom Paid	Margaret Lav	wlor	A Committee of the Comm		en e		13.00	und da is <u>is da jidi.</u> T
Margaret Lawtor	House#	Street Address	10 D27	* 4.7. 0			<b>}</b>	ure	
House # Street Address 13.00		2						AND BELLEVIEW	
House # Street Address 219-B North 14th Street 219-B North 14th Street			State PA	li i	Zip -	19604	Notary fees		1

# SCHEDULE III Statement of Expenditures

Filer identification Number:	Friends of Tim Daley
Production of the Augustic	rnends of 1 m Daley

To Whom Paid	т 1		Date (MIM/DD/AYAY)	
Margaret A.	Lawior		05/15/2015	15.00
House # Street Address	219-B North 14th	ı Street	Description of Expenditu	re
	State	77.6	DI C	
Reading	PA	Code 19604	Flowers for campai	gn advertising
To Whom Paid Margaret A. I	awlor	til til som kanner och der som kanner som ble som kanner som ett som til som til som til som til som til som t	Date [MM/DD/YYYY]	10.00
			05/15/2015	19.08
House # Street Address	219-B North 14th	h Street	Description of Expenditur	
Reading	State PA	Zip	Flowers for campaig	gn advertising
To Whom Paid Margaret A. I	Lawlor	des No. sont immers als access of the thirty the initial is about the end of the end	Date (MM/DD) YMY	59.99
			05/15/2015	The state of the s
Street Address 2	19-B North 14th S	Street	Description of Expenditur	
City Reading	State PA	Zip 10604	Office supplies	
		Code 19004		
To Whom Paid Margaret A. L	awlor		Date [MM/DD/YYYY] 3. 05/15/2015	113.84
House# Street Address			Description of Expenditur	Alleria Maries
2	19-B North 14th	Street	Meaniphion of Exhaligital	Control Control of the Control of th
Reading	State PA	2lp 19604	Bingo markers for a	dvertising
To Whom Paid The Peanut B	or		Date MM/DD/YYY	1000 00
el reprince de la proposición de la companya de la	a.i		05/19/2015	1022.00
House # Street Address 3	32 Penn Street		Description of Expenditur	
Reading	State PA	Zip Code 19602	Volunteer thank-yo	u
To Whom Paid Margaret A. I		e latinia de la publica de la composición del composición de la composición de la composición del la composición del composición del composición de la composición del composición	Date [MM/DD/YYYY]	58.38
Margaret A. I	-awioi		05/29/2015	
	19-B North 14th	Street	Description of Expenditur	
Reading	State PA	Zip Code 19604	Printer ink	
To Whom Paid Margaret A.	Lawlor		Date [NIM/DD/YY-W]	34.62
House # Street Address	310 D 31 41 441	0.	05/29/2015 Description of Expenditure	
	219-B North 14th			
Reading	State PA	Zip Code 1 19604	Printer ink and pape	er
To Whom Peid Brittany Ny	e	,	Date [MIM/DD/YYYY] \$ 06/08/15	10.00
	8 North 6th Stree	et .	Description of Expenditure	
Chy Reading	State PA	Zip Code 19601	Notary Fee	

# SCHEDULE III Statement of Expenditures

Filer Identification Number:	
	Friends of Tim Daley
	Friends of 11m Daley

To Whom Paid	Marge A. L	awlor	osene Da usig Di kari egyel			Date [MM/DD/YYYY] 5 % 06/08/2015	2282.76
House#	Street Address 219-B North 14th Street				Description of Expenditure		
City Reading		State	PA	Zip Code	19604	Campaign Mgmnt Fo	ee
To Whom Paid		en a françair de la Millian de Landa d		, is a second of the second of		Date [MM/DD/YYYY] \$	
House #	Street Address					Description of Expenditure	
City		State		Zip Code			
To Whom Paid			onenalisis Kass			Date [MM/Db/YYYY] 5	
House #	Street Address	M-10-10-10-10-10-10-10-10-10-10-10-10-10-				Description of Expenditure	eriologica (n. 120). Oznaki z najveje 1900. Pravojski projekt (n. 1200.)
Uiy		State		Zíp Code			
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House #	Street Address					Description of Expenditure	
Gw		State		Zip Code			
To Whom Paid						Date [MM/DD/XYYY] := \$	
House #	Street Address				·	Description of Expenditure	
City		State		Zip Code			
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House #	Street Address					Description of Expenditure	
Chy.	(a)	State		Zip Gode			
Fo Whom Paid						Date [MM/DD/YYYY] \$	Managara da Chap, pila di managara di Managara
House N	Street Address			<u>, , , , , , , , , , , , , , , , , , , </u>		Description of Expenditure	
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To Whom Paid	u a ni		i kartist ( ak.;a. s.;	And the second s		Date (MM/DD/YYYY) \$	anti needi antidee dhamaan ka ka a affirminin ay maa yamaa dha a dha a dha
House #	Street Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Description of Expenditure	
A THE STATE OF THE		State		Zip Code			

### SCHEDULE IV

### **Statement of Unpaid Debts**

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

and in the same of	
Filer Identification Number:	Friends of Tim Daley
	Friends of Tim Daley
	Thenes of Thir Datey
AND THE PROPERTY OF THE PARTY O	

Name of Creditor			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	
City			None
		State Zip Code	
Description of Debt			
Name of Creditor			Outstanding Balance of Debt
House#	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	
City		State Z/p	
Description of Debt	A Company of the Comp	College transport	
age to a substitution of the			
Name of Creditor	A CONTRACTOR OF THE CONTRACTOR		Outstanding Balance of Debt
House #	Street Address	DATE DEBT-INCURRED [MM/DD/YYYY]	
		State Zip	NAME OF THE PROPERTY OF THE PR
Description of Debt		Lodde-Million	Services Francisco
Name of creditor			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED	Sustaining Balance of Debt.
Control Contro		(MIM/OD/YYYY)	
City		State: Zip Code	Construction of the Constr
Description of Debt	Sign gate Sign g		Kasa I
Name of Creditor			Ourstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM//DD/YYYY]	6
		[[ww/200/1111]	
City		Zip Code	
Description of Debt	C And C S S And C S S S S S S S S S S S S S S S S S S	1,240,240,240,240,240	
Name of Creditor			Outstanding Balance of Debt
House#	Street Address	DATE DEBT INCURRED  [MM/DD/YYYY]	
	ASSESSED ACTIONS OF THE CONTROL OF T	The second secon	
City Commence of the commence		State Zip Code	3) manual (
Description of Debt	And the second s		,